

**HAWAII STATE ETHICS COMMISSION**

1001 BISHOP STREET, HONOLULU, HAWAII 96813

or P.O. BOX 616, HONOLULU, HAWAII 96809

TEL: (808) 587-0460 FAX: (808) 587-0470

email: ethics@hawaiiethics.orgWeb site: www.hawaii.gov/ethics

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STATE OF HAWAII
STATE ETHICS COMMISSION

NOTE: This is a public document.

LOBBYIST REGISTRATION FORM

(Type or Print Clearly)

PART I LOBBYIST		
NAME (Last) Datta	(First) Kyle	(Middle) TELEPHONE 808-544-8960
MAILING ADDRESS (Street) 737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower		FAX 808-544-8961
		EMAIL mclay@uluponoinitiative.com
(City) Honolulu	(State) Hawaii	(Zip Code) 96813
EMPLOYING ORGANIZATION (Fill in only if you are employed by a business entity which has been retained to lobby)		TELEPHONE
MAILING ADDRESS (Street)		FAX
		EMAIL
(City)	(State)	(Zip Code)

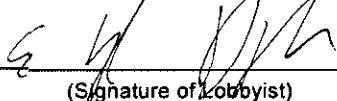
PART II ORGANIZATION		
NAME OF ORGANIZATION YOU LOBBY FOR (Do not abbreviate) Ulupono Initiative		TELEPHONE 808-544-8960
MAILING ADDRESS (Street) 737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower		FAX 808-544-8961
		EMAIL
(City) Honolulu	(State) Hawaii	(Zip Code) 96813
NAME OF PERSON RESPONSIBLE FOR PREPARING ORGANIZATION'S EXPENDITURES STATEMENT Murray Clay		TELEPHONE 808-544-8960
MAILING ADDRESS (Street) 737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower		FAX 808-544-8961
		EMAIL
(City) Honolulu	(State) Hawaii	(Zip Code) 96813

PART III DESCRIPTION OF SUBJECTS UPON WHICH YOU EXPECT TO LOBBY

- | | | | |
|--|--|---|--|
| <input checked="" type="checkbox"/> Agriculture | <input type="checkbox"/> Education | <input type="checkbox"/> Human Services | <input checked="" type="checkbox"/> Science, Technology & Economic Development |
| <input type="checkbox"/> Communications & Public Utilities | <input checked="" type="checkbox"/> Government Operation & Finance | <input type="checkbox"/> Intergovernmental Relations, International Affairs | <input type="checkbox"/> Tourism & Recreation |
| <input type="checkbox"/> Consumer Protection & Commerce | <input type="checkbox"/> Hawaiian Affairs | <input type="checkbox"/> Labor & Employment | <input type="checkbox"/> Transportation |
| <input type="checkbox"/> Culture, Arts, Historic Preservation | <input type="checkbox"/> Health | <input checked="" type="checkbox"/> Planning, Land & Water Use Management | <input type="checkbox"/> Other: (indicate below) |
| <input checked="" type="checkbox"/> Ecology, Energy Environmental Protection | <input type="checkbox"/> Housing | <input type="checkbox"/> Public Safety & Corrections | |

PART IV CERTIFICATION OF LOBBYIST

I hereby certify that the information furnished above is, to the best of my knowledge, correct and complete.


(Signature of Lobbyist)

1/15/13
(Date)

PART V AUTHORIZATION TO LOBBY

NAME	TITLE OF AUTHORIZING OFFICER OR PERSON REPRESENTED
Murray Clay	Managing Partner

NAME OF ORGANIZATION (if applicable)

Ulupono Initiative

TELEPHONE

808-544-8960

MAILING ADDRESS (Street)

737 Bishop Street, Suite 2350, Pacific Guardian Center, Mauka Tower

FAX 808-544-8961

EMAIL
mclay@uluponoinitiative.com

(City)

Honolulu

(State)

Hawaii

(Zip Code)

96813

I hereby authorize the above - named person to engage in lobbying activities on behalf of the undersigned.


(Signature of Authorizing Officer or Person Represented)

1/16/2013
(Date)